

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Handwritten]</i>		<i>05-31-01</i>
O.I.P.E. CLASSIFIER		<i>43</i>	<i>6/11/01</i>
FORMALITY REVIEW	<i>SA</i>	<i>1085</i>	<i>5-25-01</i>
RESPONSE FORMALITY REVIEW	<i>MO</i>	<i>SAU</i>	<i>07/01/01</i>

INDEX OF CLAIMS

Rejected N
 Allowed I
 Canceled A
 Restricted O
 Non-elected
 Interference
 Appeal
 Objected

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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